

MULTIPLE DEPT. CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE						
						07575743							
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51					
2		1						52					
3		2						53					
4		(1)						54					
5		(1)						55					
6		(1)						56					
7		(1)						57					
8		(1)						58					
9		(1)						59					
10		(1)						60					
11		(1)						61					
12		(1)						62					
13		(4)						63					
14		(1)						64					
15		(1)						65					
16		(5)						66					
17		(2)						67					
18		(1)						68					
19		(1)						69					
20		(1)						70					
21		(1)						71					
22		(1)						72					
23		(1)						73					
24		(1)						74					
25		(1)						75					
26		(1)						76					
27		(1)						77					
28		(1)						78					
29		(1)						79					
30		(1)						80					
31		(1)						81					
32		(1)						82					
33		(1)						83					
34		(1)						84					
35								85					
36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	2												
TOTAL DEP.	35												
TOTAL CLAIMS	37												